

UTILITY PATENT APPLICATION TRANSMITTAL

Only for new nonprovisional applications under 37 C.F.R. § 1.53(b)

Attorney Docket No.	CRNG.010 Case No.: SP01-024	Total Pages	3
First Named Inventor or Application Identifier Antoniadou et al		Title Performance Optimizer for Transmission Systems	
Express Mail Label No.	EL689102716US		

ADDRESS TO:

Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

1. <input checked="" type="checkbox"/> * Fee Transmittal Form (Submit an original and a duplicate for fee processing)	
2. <input checked="" type="checkbox"/> Specification (preferred arrangement set forth below)	[Total Pages] <input type="text" value="16"/>
<ul style="list-style-type: none"> - Descriptive title of the invention - Cross References to Related Applications - Statement Regarding Fed sponsored R&D - Reference to Microfiche Appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 	
3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. § 113)	[Total Sheets] <input type="text" value="2"/>
4. <input checked="" type="checkbox"/> Oath or Declaration	[Total Pages] <input type="text" value="3"/>
a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d)) (for continuation/divisional with Box 16 completed) i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).	

5. <input type="checkbox"/> Microfiche Computer Program (Appendix)
6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
a. <input type="checkbox"/> Computer Readable Copy
b. <input type="checkbox"/> Paper Copy (identical to computer copy)
c. <input type="checkbox"/> Statement verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

7. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))	
8. <input type="checkbox"/> 37 C.F.R. § 3.73(b) Statement (when there is an assignee)	<input type="checkbox"/> Power of Attorney
9. <input type="checkbox"/> English Translation Document (if applicable)	
10. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449	<input checked="" type="checkbox"/> Copies of IDS Citations
11. <input type="checkbox"/> Preliminary Amendment	
12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (should be specifically itemized)	
14. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)	
15. <input type="checkbox"/> Other:	

16. If a **CONTINUING APPLICATION**, check appropriate box, and supply the requisite information below and in a preliminary amendment:


☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: 08/

Prior application information: Examiner: «EXAMINER» Group / Art Unit: «GROUP_ART_UNIT»

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS

☒ Customer Number or Bar Code Label or ☐ Correspondence address below

NAME	Susan Morse				
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Name (Print/Type)	Mary Y. Redman	Registration No. (Attorney/Agent)	29,881		
Signature				Date	3/26/01

FEE TRANSMITTAL for FY 2000

Complete if Known

TOTAL AMOUNT OF PAYMENT (\$1,300.00)

Application Number	
Filing Date	
First Named Inventor	Neophytos Antoniadis
Examiner Name	
Group / Art Unit	
Attorney Docket Number	CRNG.010 Case No.: SP01-024

METHOD OF PAYMENT (check one)

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number 03-3325

Deposit Account Name Corning Incorporated

- ☒ Charge Any Additional Fees Required Under 37 C.F.R. §§ 1.16 and 1.17

2. ☐ Payment Enclosed:
☐ Check ☐ Money Order ☐ Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code	Fee (\$)	Fee Description	Fee Paid
101	710	Utility filing fee	710
106	320	Design filing fee	
107	490	Plant filing fee	
108	710	Reissue filing fee	
114	150	Provisional filing fee	

SUBTOTAL (1) (\$710)

2. EXTRA CLAIM FEES

Large Entity Fee Code	Fee (\$)	Fee Description	Fee Paid
103	18	Claims in excess of 20	
102	80	Independent claims in excess of 3	
104	270	Multiple dependent claim, if not paid	
109	80	** Reissue independent claims over original patent	
110	18	** Reissue claims in excess of 20 and over original patent	

SUBTOTAL (2) (\$590)

3. ADDITIONAL FEES

Large Entity Fee Code	Fee (\$)	Fee Description	Fee Paid
105	130	Surcharge - late filing fee or oath	
127	50	Surcharge - late provisional filing fee or cover sheet	
139	130	Non-English specification	
147	2,520	For filing a request for reexamination	
112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840	Requesting publication of SIR after Examiner action	
115	110	Extension for reply within first month	
116	390	Extension for reply within second month	
117	890	Extension for reply within third month	
118	1,390	Extension for reply within fourth month	
128	1,890	Extension for reply within fifth month	
119	310	Notice of Appeal	
120	310	Filing a brief in support of an appeal	
121	270	Request for oral hearing	
138	1,510	Petition to institute a public use proceeding	
140	110	Petition to revive - unavoidable	
141	1,240	Petition to revive - unintentional	
142	1,240	Utility issue fee (or reissue)	
143	440	Design issue fee	
144	600	Plant issue fee	
122	130	Petitions to the Commissioner	
123	50	Petitions related to provisional applications	
126	240	Submission of Information Disclosure Stmt	
581	40	Recording each patent assignment per property (times number of properties) _____ x	
146	710	Filing a submission after final rejection (37 C.F.R. § 1.129(a))	
149	710	For each additional invention to be examined (37 C.F.R. § 1.129(b))	

Other fee (specify) _____

Other fee (specify) _____

***Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)**

SUBMITTED BY

Name (Print/Type) Mary Y. Redman

Signature

Completed (if applicable)

Registration No. (Attorney/Agent) 29,881

Date 3/26/01